

RADNORSHIRE COUNTY COUNCIL
and
RADNORSHIRE EDUCATION COMMITTEE



ANNUAL REPORTS

of the

County Medical Officer of Health

County Welfare Officer

and

Principal School Medical Officer

for

1966



F. J. H. CRAWFORD, M.D., B.Sc., D.P.H.
Barrister-at-Law
Telephone No. - Llandrindod Wells 2262

RADNORSHIRE COUNTY COUNCIL

and

RADNORSHIRE EXECUTIVE COMMITTEE

A N N U A L R E P O R T S

of the

COUNTY MEDICAL OFFICER OF HEALTH

COUNTY WELFARE OFFICER

and

PRINCIPAL SCHOOL MEDICAL OFFICER

for

1 9 6 6

F. J. H. Crawford, M.D., B.Sc., D.P.H.,
Barrister-at-Law

Telephone No. Llandrinod Wells 2292

RADNORSHIRE COUNTY COUNCIL

MEMBERS OF THE COUNTY COUNCIL

Chairman: Alderman E. T. Kinsey Morgan, C.B.E.

Vice Chairman: Alderman W. H. Edwards

Aldermen:

R. Brick

J. J. Price

G. R. Davies, C.B.E.

Penry Pritchard

W. H. Evans

J. S. Ruell

Mrs. M. A. Gibson-Watt, M.B.E.

T. F. Vaughan-Prickard, C.V.O.

Councillors:

Mrs. D. Y. Barstow

Harri Lewis, C.B.E.

W. R. A. Breeze

T. R. Lloyd

F. G. J. Dalton

C. A. Masters

C. T. Davies

G. D. Morgan

J. S. Davies

T. O. Nicholls, O.B.E.

J. C. Deakins

A. L. Pritchard

Walter Evans

N. F. Reay

O. Gibbin

R. L. Ryder

Major J.D. Gibson-Watt, M.C., M.P.

J. G. Taft

R. J. Griffiths

Mrs. R. M. Thomas

E. T. Harries

E. Vaughan

L. P. Havard

Brigadier Sir C.M.D. Venables-
Llewelyn, Bart., M.V.O.

R. P. L. Hughes

C. E. Watkins

C. P. Jones

Lt.Col. H.B. Watkins, M.C., O.B.E.

J. H. Jones

J. Watkins, M.B.E.

V. T. Jones

R. F. Knill

HEALTH COMMITTEE

(As at 31st December, 1966)

Chairman: Alderman W. H. Edwards
Vice Chairman: Councillor T. O. Nicholls, O.B.E.
Aldermen: W. H. Evans
Mrs. M. A. Gibson-Watt, M.B.E.
E. T. Kinsey Morgan, C.B.E.

Councillors:

Mrs. D. Y. Barstow	V. T. Jones
F. G. J. Dalton	<u>R. T. Knill</u>
Walter Evans	N. F. Reay
O. Gibbin	<u>E. Vaughan</u>
R. J. Griffiths	Brigadier Sir C.M.D. Venables- Llewelyn, Bart., M.V.O.
E. T. Harris	C. P. Jones
R. P. L. Hughes	

Co-opted:

Mrs. F. J. Edwards	Mrs. H. B. Watkins
Mrs. M. Howse	W. J. Beavan
Miss D. A. Payne, M.B.E.	F. H. Lloyd
Miss J. Todd, M.B.E.	Dr. D. F. M. Roberts
Lady Delia Venables-Llewelyn	

WELFARE SERVICES COMMITTEE

Chairman: Alderman Penry Pritchard
Vice Chairman: Councillor R. P. L. Hughes
Alderman:
R. Brick G. R. Davies, C.B.E.
W. H. Edwards E. T. Kinsey Morgan, C.B.E.
J. J. Price Mrs. M. A. Gibson-Watt, M.B.E.

Councillors:

C. T. Davies N. F. Reay
W. Evans R. L. Ryder
O. Gibbin Mrs. R. M. Thomas
L. P. Havard E. Vaughan
R. P. L. Hughes G. D. Morgan
A. L. Pritchard Lt Col. H. B. Watkins, M.C., O.B.E.

Co-opted:

Mrs. A. Breeze Miss D. A. Payne, M.B.E.
Mrs. G. E. Curtis The Hon. Gwenllian Philipps, O.B.E.
Mrs. M. Howse Mrs. J. P. de Winton
Mrs. D.G. Masters W. J. Beavan
Rev. C. D. Venables

RADNORSHIRE EDUCATION COMMITTEE

(As on 31st December, 1966)

Chairman: Councillor T. O. Nicholls, O.B.E.

Vice-Chairman: Councillor C. A. Masters

Aldermen:

R. Brick	W. H. Evans
W. H. Edwards	P. Pritchard
J. J. Price	E. T. Kinsey Morgan, C.B.E.
G. R. Davies, C.B.E.	Mrs. M. A. Gibson-Watt, M.B.E.
J. S. Ruell	T. F. Vaughan Prickard, C.V.O.

Councillors:

Mrs. D. Y. Barstow	W. R. A. Breeze
F. G. J. Dalton	C. T. Davies
J. S. Davies	Major J.D. Gibson-Watt, M.C., M.P.
R. J. Griffiths	E. T. Harris
C. P. Jones	O. Gibbin
J. H. Jones	L. P. Havard
V. T. Jones	R. P. L. Hughes
<u>R. T. Knill</u>	Harri Lewis, C.B.E.
T. R. Lloyd	G. D. Morgan
A. L. Pritchard	R. L. Ryder
<u>J. G. Taft</u>	Mrs. R. M. Thomas
C. E. Watkins	N. F. Reay
<u>E. Vaughan</u>	Brigadier Sir C.M.D. Venables-
Lt. Col. H. B. Watkins, M.C.,	Llewelyn, Bart., M.V.O.
W. Evans O.B.E.,	J. C. Deakins

Co-opted:

Mr. H. Donald Davies	Rev. Canon T. E. Griffiths
Mr. J. Prince	Mrs. M. Howse
Rev. H. T. Samuel	Mr. W. Denver James
Lady Delia Venables-Llewelyn	Miss I. M. Stoddart
	Mrs. G. M. Walker

SPECIAL SERVICES SUB-COMMITTEE

Chairman: Councillor Brigadier Sir C.M.D. Venables-Llewelyn,
Bart., M.V.O.

Vice Chairman: Councillor O. Gibbin

Aldermen:

G. R. Davies, C.B.E.

W. H. Edwards

W. H. Evans

Mrs. M.A. Gibson-Watt, M.B.E.

E. T. Kinsey Morgan, C.B.E.

J. J. Price

Penry Pritchard

T. F. Vaughan Prickard, C.V.O.

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R. T. Knill

Harri Lewis, C.B.E.

G. D. Morgan

T. O. Nicholls, O.B.E.

N. F. Reay

Mrs. R. M. Thomas

J. Watkins

Co-opted:

Mr. J. Prince

Mrs. M. Howse

Rev. H. T. Samuel

Mr. W. Denver James

Lady Delia Venables-Llewelyn

STAFF

County Medical Officer of Health
County Welfare Officer and
Principal School Medical Officer

F. J. H. Crawford, B.Sc., Ch.B.,
M.D., M.R.C.S., L.R.C.P., D.P.H.,
Barrister-at-Law, Middle Temple

Deputy County Medical Officer of
Health and Deputy Principal School
Medical Officer (part-time)

M. Dilys Owen, J.P., B.Sc.,
M.B., Ch.B., D.P.H., D(Obst)R.C.O.G.

School Medical Officers (part-
time)

B.C. Davies, B.M., B.Ch.,
D.(Obst.)R.C.O.G.
R.J. Walker, M.B., B.Ch.
Beryl A. Davies, B.Sc., M.B., B.Ch.

Consultant Psychiatrist and
Advisor in Mental Health (part-
time)

G. Diggle, M.B., Ch.B., M.R.C.P.(Ed)
D.P.M.

Chest Physician (part-time)

D.I.A. Williams, M.B., Ch.B.,

Assistant Chest Physician
(part-time)

P. P. Mulhall, M.B., Ch.B., B.A.O.

School Ophthalmic Surgeon (part-
time)

S.S.F. Munro, M.B., Ch.B., D.O.M.S.

County Dental Officer and
Principal School Dental Officer

P.G.H. Griffith, L.D.S.

Superintendent Nursing Officer,
Supervisor of Midwives and
Home Help Organiser

E. Jean Bell Currie, S.R.N., S.C.M.
H.V.Cert., Queen's Nurse

Psychiatric Social Worker
(part-time)

Gwendoline Morgan

Mental Welfare Officers

All District Nurses, Health
Visitors and Mr.H.E. Morris,
(part-time)

Dental Attendant

Olwen P. Mantle

County Analyst (part-time)

D.C. Jenkins, M.Sc., F.R.I.C.,
D.I.C.

Home Teacher of the Blind

Richard A. Oldbury

Craft Instructress

Patricia Richards

Physiotherapist (part-time)

Haulwen Davies, M.C.S.P.

Officer in Charge, (Central
Ambulance Control, part-time)

T. A. O. Meredith

Clerical Staff

W. J. Meredith (Chief Clerk)
G. E. H. Steventon
Enid L. Barker
W. S. Evans
Betty Hickling
Glenis Davies
Pamela Jones

District Nurses:

The following District Nurses and Health Visitors are employed by the County Council. The nursing services are otherwise the responsibility of the Radnorshire County Nursing Association, half of the members of the Executive Committee being appointed by the County Council.

<u>Nursing Area</u>	<u>Name of Nurse</u>	<u>Qualifications</u>
Beguildy	Ida M. Jones	S.R.N., S.C.M., Queens Nurse
Cwmbach & Newbridge	Barbara Hamar	S.R.N., S.C.M.
Clyro	Elizabeth F. Price	S.R.N., S.C.M.
Knighton	Margaret Haime Sheila M. Feddis	R.F.N., S.C.M. S.R.N., S.C.M., Queens Nurse
Llanddewi	Gwyneth Lewis	S.R.N.
Llandrindod Wells	Beryl Pugh Edith Rogers	S.R.N., Queens Nurse S.R.N., S.C.M., Queens Nurse
Nantmel	Winifred L. Roe	S.R.N., S.C.M.
New Radnor	Iris M. Davies Frances M. Niblett (part-time)	S.R.N., S.C.M. S.R.N.
Painscastle	Mary Hayward	S.C.M., S.E.N.
Penybont	Christine McDermott	S.R.N., S.C.M.
Presteigne	Norline Baynham Joan B. Parker (part-time)	S.R.N., S.C.M. S.R.N.
Rhayader	Olwen Wingfield	S.R.N.
Supply Nurse	Elizabeth M. Campbell	S.R.N., S.C.M., Queens Nurse

Health Visitors and School Nurses

Margaret K. Chaplin, S.R.N., S.C.M., H.V.Cert.,
Queens Nurse
Enid M. Hamar S.R.N., S.C.M., H.V.Cert.,
Queens Nurse

S. Margaret Cole	S.R.N., S.C.M., H.V.Cert.
Christine Nicholl (appointed 30.9.66)	S.R.N., S.C.M., H.V.Cert.

Chiropodists (part-time)

(Employed by the County of Radnor Old People's Welfare Committee on behalf of the Local Health Authority).

John B.C. Mason (resigned 30.9.66)	M.Ch.S.
William H. Peplow	M.Ch.S

STAFF OF THE COUNTY WELFARE DEPARTMENT (Not included in the Health Department)

District Welfare Officers

W. L. Wilding, Llandrindod Wells.
H. E. Morris, Knighton
H. F. Hartwright, Rhayader (resigned 3.6.66)
Miss Mary Williams Rhayader (appointed 3.6.66)

Superintendents and Matrons of Old People's Homes

Mr. & Mrs. G.H. Waterhouse, "The Cottage", Knighton
Mrs. G. Allen, R.M.N. "Wylesfield", Llandrindod Wells
(resigned 26.6.66)
Miss E. Stephens, S.R.N., S.C.M., "Hafan" Rhayader

ASSOCIATED OFFICERS

Clerk of the Council	D. C. S. Lane
County Treasurer	C. Roberts, F.I.M.T.A., F.R.V.A.
County Surveyor	J. J. Teesdale, A.M.I.C.E., A.M.I.Mun.E., A.M.I.Struct.E.
Chief Education Officer	M. W. Cole, B.A.
County Architect and County Planning Officer	G. L. Edwards, Dip.Arch., A.R.I.B.A.
Children's Officer	Ceinwen Anthony, S.R.N., S.C.M., H.V.Cert.
Clerk of the Radnorshire Executive Council	K. J. Evans
Inspector of Weights & Measures	R. W. Price

HEALTH OFFICERS OF DISTRICT COUNCILS

MEDICAL OFFICERS OF HEALTH (part-time)

Urban Districts:

Knighton	B. C. Davies, B.M., B.Ch., D(Obst.) R.C.O.G.
Llandrindod Wells	J. E. Jenkins, M.A., B.M., B.Ch.
Presteigne	R. J. Walker, M.B., B.Ch.

Rural Districts:

Colwyn	D. F. Cameron, M.B., Ch.B.
Knighton	J. G. Garman, M.R.C.S., L.R.C.P.
New Radnor	R. H. Jobson, M.B., Ch.B.
Paincastle	W. M. E. Anderson, D.S.O., B.A., M.D., B.Ch.
Rhayader	J. Davies, M.B., B.Ch.

PUBLIC HEALTH INSPECTORS

Urban Districts:

Knighton	H. Jones, M.R.S.H., M.I. Mun. E.
Llandrindod Wells	R. J. Morris, A.R.I.C.S., M.R.S.H., Cert. P.H.I.
Presteigne	G. V. R. Lee, M.R.S.H., M.A.P.H.I.

Rural Districts:

Colwyn	J. C. Bowen, M.A.P.H.I., C.R.S.H., M.R.I.P.H.H.
Knighton	D. I. Davies, M.R.S.H., M.A.P.H.I., M.R.I.P.H.H.
New Radnor	L. Allen, M.A.P.H.I.
Paincastle	W. D. Morgans, C.R.S.H.
Rhayader	G. H. Roberts, M.R.S.H., M.A.P.H.I.

TO THE CHAIRMAN AND MEMBERS OF THE RADNORSHIRE COUNTY COUNCIL
AND THE COUNTY EDUCATION AUTHORITY

Ladies and Gentlemen,

I have the honour to submit to you my report on the health of the people of Radnorshire during the year 1966, and on the services provided by the county, and which are administered by the Health Committee, the Welfare Services Committee and the Special Services Sub-Committee of the Education Committee.

Once again, the statistics show that the health services of the county are efficient and that the state of the health of the population generally has been satisfactory.

It is, however, disquieting to observe that the number of deaths considerably exceeded the number of births, this being a reflection of the continued exodus of young people from this county in search of greater opportunity elsewhere. The birth rate was indeed very low (12.5 per 1,000 as compared with 17.7 for England and Wales) and the death rate was high (13.2 as compared with 11.7 for England and Wales).

For the sixth consecutive year there were no deaths associated with childbearing and "the great danger of childbirth" is now happily a thing of the past.

Our Infant Mortality rate of 13.1 compares very favourably with the rate of 19.0 for England and Wales and our Peri-natal Mortality rate was also low.

There were 9 deaths from Lung Cancer. Deaths from this disease will continue to rise until the Government take energetic action. One urgently needed reform is the abolition of coin-operated cigarette dispensing machines by which young children are enabled to evade the law forbidding the sale of cigarettes to those under 16 years of age.

The year saw the opening at Rhayader of the first entirely purpose built health clinic in the county. This was the first chain of what might be called "Mini-clinics" with a small waiting room, a doctor's room, health visitor's room and a utility room equipped with an automatic washing machine for use by the home help service. The small waiting room necessitates the use of an appointments system for mothers and others attending. The local family doctor was approached when the clinic was first contemplated, but he did not wish to make use of the facilities there for his practice, preferring to continue to use the surgery attached to his home. It is intended

that this clinic shall be used, inter alia, as the Health Visitor's office, for meetings of the St. John Ambulance Brigade, who run the ambulance service for the area, for chiropody, and for handicraft classes for blind and physically handicapped people.

The services administered by the Welfare Services Committee continue to expand. With the opening of "Wylesfield", our 20-bedded Old People's Home in Llandrindod Wells, all our "Part III" accommodation is purpose-built. The two latest homes, "Wylesfield", and "Hafan" at Rhayader, set a high standard with 70% and 60% of the accommodation respectively in single rooms, the rest being in twin-bedded rooms. Experience suggests that even this proportion of single room accommodation may be less than the optimum.

In May, the meals on wheels scheme, which had been supplying hot meals once a week to certain old people, mainly those housebound, in four areas of the county, expanded to supply two meals. Under this scheme, which is much appreciated, county council staff cook the meals, mainly in school kitchens, the meals being conveyed to the homes of the old people by volunteers organised by the County Old People's Welfare Committee.

The School Health Service continued to depend for speech therapy and child guidance on the services kindly made available by the Herefordshire Authority. Near the end of the year, however, an application was received from a qualified speech therapist, who was about to establish her home in Radnorshire, for work in the area and the committee agreed that she should be employed for 3 sessions weekly. The great advantages of having a speech therapist of our own are, of course, that all speech defects, and not only the more serious ones can be dealt with, and that children will lose less time from school in obtaining treatment.

In my last annual report, it was mentioned that a member of the teaching staff of Radnorshire school developed respiratory tuberculosis and three pupils in the school developed this disease. Happily all made a complete recovery.

The Education Committee and the County Council, however, agreed that special measures should be taken to reduce, as far as possible, such hazards in the future.

The measures agreed included:

- (a) Regular chest X-raying of all members of the teaching staff.

The Mass Radiography service of the Welsh Hospital Board have undertaken to locate an X-ray unit in the larger towns of Radnorshire every three years. The next visit of this unit has been promised in May/June 1968.

All teachers in the county were asked to agree to have a chest X-ray on each such occasion and only four refused this request.

- (b) Serial tuberculin testing of every child in Radnorshire schools every year.

One of our Health Visitors had two weeks training in tuberculin testing with the Cardiff City Health Department and is now competent to undertake this work.

No child will, of course, be tested unless the parents have given written consent. The scheme was first inaugurated early in 1967.

I am grateful to you, Ladies and Gentlemen, and particularly to the Chairmen of the principal committees for their generous support and encouragement and finally, I am glad to acknowledge the help I receive in this work from a loyal staff.

I am,

Your obedient servant,

FRANK J. H. CRAWFORD.

PART I

LOCAL HEALTH AUTHORITY SERVICES

AND

WELFARE SERVICES

General Statistical Summary of the County

Statistics relating to population, births and deaths are provided by the Registrar General

The number of births, stillbirths and deaths allocated to the area are those registered during the year 1966 as adjusted for inward and outward transfers.

The following is a summary of the vital statistics for the county:

Area in acres	301,165
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Population (Registrar General's Estimate)

Urban Districts	6,250	
Rural Districts	12,050	18,300

Urban Districts:

Knighton	1,870	
Llandrindod Wells	3,150	
Presteigne	1,230	6,250

Rural Districts:

Colwyn	1,610	
Knighton	2,680	
New Radnor	2,040	
Painscastle	1,630	
Rhayader	4,090	12,050

Total County	18,300
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Rateable Value	£521,818
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Product of a Penny Rate	£2,007
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Live Births	M.	F.	Total
Legitimate	114	98	212
Illegitimate	7	10	17
	<hr/>		
	121	108	229

Live Birth rate per 1,000 population	12.5
Live Birth rate per 1,000 population (England & Wales)	17.7
Illegitimate Live Births per cent of total births	7.4

Stillbirths:

Legitimate	1
Illegitimate	-
	<hr/>
Total	1

Stillbirth rate per 1,000 total live and stillbirths	4.3
Total live and stillbirths	230

Deaths of Infants under 1 year of age:

Legitimate	3
Illegitimate	-
	<hr/>
Total	3

Infant mortality rate per 1,000 live births	13.1
Infant mortality rate per 1,000 live births (England & Wales)	19.0

Legitimate Infant mortality rate per 1,000 legitimate live births	14.1
Illegitimate Infant mortality rate per 1,000 illegitimate live births	nil
Neo-natal mortality rate per 1,000 (under 4 weeks)	4.4
Early neo-natal mortality rate per 1,000 (under 1 week)	4.4
Peri-natal mortality rate (stillbirths and deaths under one week combined, per 1,000 live and stillbirths)	8.6
Maternal deaths (including abortion)	nil
Maternal mortality rate per 1,000 live and stillbirths	nil
Legitimate birth rate per 1,000 population	11.6
Illegitimate birth rate per 1,000 population	0.9
Stillbirth rate per 1,000 population	0.05
Illegitimate stillbirth rate per 1,000 (total illegitimate live and stillbirths)	nil

Deaths -

Total deaths	242
Death rate	13.2
Death rate (England and Wales)	11.7

Causes of death are given below together with the number who died and the relative percentage of the total death (242).

Mortality Figures

<u>Disease</u>	<u>Number of deaths</u>	<u>Percentages of Total Deaths</u>
Heart Disease (all forms)	88	36.4
Vascular lesions of nervous system	53	21.9
Cancer (all forms, including 9 deaths from lung cancer	32	13.2
Other defined or ill-defined diseases	21	8.8
Other Circulatory Disease	13	5.4
All other accidents	7	2.9
Bronchitis	5	2.1
Suicide	4	1.7
Influenza	3	1.2
Other Diseases of Respiratory System	3	1.2
Tuberculosis, respiratory	2	.8
Pneumonia	2	.8
Ulcer of stomach and duodenum	2	.8
Congenital malformations	2	.8
Syphilitic disease	1	.4
Other infective and parasitic diseases	1	.4
Nephritis and Nephrosis	1	.4
Hyperplasia of prostate	1	.4
Motor vehicle accidents	1	.4

Morbidity Figures

The average weekly numbers of new claims for sickness benefit for the past five years are given in the table below. These figures are compiled from returns made by the Ministry of Pensions and National Insurance.

Month	1962		1963		1964		1965		1966	
	No.	Per 1,000 population	No.	Per 1,000 population	No.	Per 1,000 population	No.	Per 1,000 population	No.	Per 1,000 population
January	98	5.3	63	3.4	76	4.2	85	4.5	74	4.0
February	60	3.2	61	3.3	104	5.7	59	3.2	92	5.0
March	59	3.2	75	4.1	93	5.1	60	3.3	104	5.6
April	63	3.4	52	2.8	64	3.5	50	2.7	59	3.2
May	52	2.8	53	2.9	39	2.1	49	2.6	48	2.6
June	44	2.3	48	2.6	40	2.2	49	2.6	39	2.1
July	34	1.8	40	2.2	36	2.0	41	2.2	37	2.0
August	37	2.0	38	2.1	34	1.9	45	2.4	40	2.2
September	36	1.9	48	2.6	50	2.7	48	2.6	35	1.9
October	48	2.6	46	2.5	46	2.5	51	2.7	48	2.6
November	48	2.6	64	3.5	49	2.1	52	2.8	55	3.0
December	52	2.8	53	2.9	51	2.8	58	3.1	50	2.7

Care of Mothers and Young Children

There were no maternal deaths in the county in 1966.

Infant Mortality

Area	No of Deaths under 1 year 1966	Rates per 1,000 births	
		1966	1962-66
Urban District:			
Knighton	..	..	6
Llandrindod Wells	..	..	8
Presteigne	..	..	10
Rural Districts:			
Colwyn	1	71.4	20
Knighton	..	..	10
New Radnor	1	40.0	26
Painscastle	..	..	-
Rhayader	1	20.4	23
Urban Districts	..	..	8
Rural Districts	3	20.7	17
Administrative County	3	13.1	14

Congenital Defects

Notifications received of congenital defects apparent at birth numbered two (2). Initial information is obtained from the birth card. These births are notified to the Registrar General and also placed on the "At Risk Register".

Babies "At Risk"

Four years ago the Minister of Health directed every local health authority to keep a register of babies who were considered "at risk".

The "at risk" groups are classified under five headings, "Family History"; "Pre-Natal"; "Peri-Natal"; "Post-Natal" and "Symptomatic Group". All babies born who for any reason are considered to be "at risk" are notified to the local health authority, by the midwife or health visitor, and a register is kept.

These children are referred to the family doctor and paediatrician so that any necessary action may be taken. In this way problems can be revealed and the best possible action to deal with them can then be taken at the most appropriate time.

Premature Infants

During the year fifteen premature babies were born in hospital and three were born at home. Two of the babies born in hospital died within 24 hours and weighed between 3lbs 4 ozs and 4lb. 6 ozs. The remaining thirteen born in hospital and the two born at home survived and have done well.

The premature baby rate per 1,000 live births was 75 compared with 48 in 1965.

Child Welfare Centres

Child Welfare Centres are held in the County as follows:

Place	Time	Medical Officer
Knighton Council Offices, Ffrydd Road.	First Tuesday in month, 2.30 p.m.	Dr. J. G. Garman
Llandrindod Wells, County Hall.	Each Tuesday except first Tuesday in month, 2.30 p.m.	Dr. M. D. Owen
Newbridge on-Wye, P.O.W. Hut.	First Wednesday in month, 3.0 p.m.	* Health Visitor
New Radnor, Walton Village Hall.	Last Monday in month, 2.30 p.m.	Dr. R. J. Walker
Presteigne, Memorial Hall	Second Tuesday in month, 2.30 p.m.	Dr. R. J. Walker
Rhayader, Health Clinic	Second Wednesday in month, 2.0 p.m.	Dr. B. Davies

* Because of reduction in numbers attending Newbridge on Wye Clinic, it was decided that it was not necessary for a doctor to attend.

Prevention of illness is the aim of the Child Welfare Centres.

Advice to mothers on feeding, child behaviour, and on problems associated with the early stages of child development is given, and helps to free the parents from many of their worries. Such centres, therefore, undertake a number of useful functions and these, to some extent, relieve the work of the general practitioner service.

Family Planning

There is no Family Planning Centre in the County, but married women seeking advice are referred to the Family Planning Clinics at Hereford, Shrewsbury and Builth Wells. The County Council makes an annual grant in respect of the clinic at Builth Wells

CHILD WELFARE CENTRES

<u>Sessions held in 1966</u>	Knighton	Llandrindod Wells	Presteigne	Newbridge-on-Wye	New Radnor	Rhayader	Total
No. of meetings	12	39	12	12	12	12	99
No. of children who attended during the year and who were born in:							
1966	65	44	31	3	16	38	197
1965	68	93	69		48	37	315
1961 64	60	70	145	27	53	47	402
Total No. of children who attended during the year;	193	207	245	30	117	122	914
No. of sessions held by General Practitioners:	12	39	12	4	12	12	91
No. of children referred elsewhere:	1						1
No. of children on "at risk" registered at end of year:	27	12	15		5	11	70
No. of sessions held by Health Visitors:				8			8

UNMARRIED MOTHERS AND THEIR CHILDREN

The Swansea and Brecon Diocesan Moral Welfare Association undertake the care of unmarried mothers in this area and the Local Health Authority makes an annual grant to the Association towards the support of this work.

Miss E. Lewis, the Association's Moral Welfare Worker submits the following report on her work in Radnorshire during 1966.

57 new cases were dealt with during 1966

7 previously reported cases still needing after-care and supervision.

Of the above -

14 were children

14 were unmarried mothers

14 were putative fathers

6 were couples seeking advice on adoption

2 enquiries for domestic help

2 prospective foster mothers

1 matrimonial

2 preventative and advice for Nursery Training

UNMARRIED MOTHERS

6 were cared for in Private Foster Homes - paid their own fees.

5 were cared for by relatives.

3 remaining at home and all necessary help and advice was given to them.

ALL Mothers were visited, and the problem discussed with their families.

PUTATIVE FATHERS

All visited and interviewed within the Radnorshire and surrounding area;

5 are supporting their children through Court or private arrangements,

7 admitted to paternity and agreed to the child being placed for adoption.

1 putative father is serving prison sentence for larceny.

1 denied paternity.

CHILDREN

3 remaining with their mothers.

3 placed with Registered Foster mothers.

8 placed for adoption, 1 with relative.

PROSPECTIVE ADOPTERS

All visited and adoption fully discussed.

2 babies placed - both legalised.

ENQUIRIES RE DOMESTIC HELP

Visited. No suitable country girls available.

ADVICE RE NURSERY TRAINING

Enquiry made, and forms sent from Children's Society.

PREVENTIVE

Visited and called on young girl about her her behaviour.

FOSTER MOTHERS

Visited; transferred 14 months old baby girl to the care of one Foster mother - very satisfactory; natural mother able to visit child weekly.

MATRIMONIAL

Wife came into Swansea; admitted to Cwmdonkin House for one week. Sorted out her many problems; found her work at Nazareth House, Swansea. Reconciliation was not advisable.

AFTER CARE

Visited all cases, helped and advised where necessary, also obtained grants from Buttle Trust or Dr. Barnado's Society.

Payment made from putative fathers.

Visits to Elan Valley; Mother much happier now that I have been able to transfer the child nearer to her.

Child restored to mother after $2\frac{1}{2}$ years. 3 visits were made. Mother not altogether honest on financial matters. Child settled quite well. Mother has left her flat and I no longer know her whereabouts.

Most cases were time consuming - many journeys to Radnorshire, but I am grateful for the excellent co-operation of the Health Department and the Children's Department. It certainly helps to lighten the burden of my work which covers such a wide area.

The Moral Welfare Radnorshire Area Committee held a very successful Teenage Conference on "Personal Relationships".

From questions that followed discussions it was proved it was both appreciated and enjoyed by the young folk present."

DENTAL CARE OF EXPECTANT AND NURSING MOTHERS

Mrs. P. G. H. Griffith, the County Dental Officer, submits the following report:

"The number of mothers taking advantage of the service is very small, but there is a growing tendency to bring the younger children along for inspection at the routine school inspection in the area.

That many of these children do not require treatment is an indication that the Health Education talks to parents are having a beneficial effect."

DENTAL SERVICES FOR EXPECTANT AND NURSING MOTHERS AND CHILDREN
UNDER 5 YEARS

<u>Part A. Attendance & Treatment</u>	Children 0 4 years inclusive	Expectant & Nursing Mothers
Number of visits for treatment		
during year: First visit	23	7
Subsequent visits	4	14
Total Visits	27	21
Number of additional courses of Treatment other than the First Course commenced during year:	5	4
Treatment provided during the year:		
Number of fillings	2	12
Teeth Extracted	1	4
General Anaesthetics given	.	.
Emergency visits by Patients	4	3
Patients X-rayed	.	.
Patients treated by scaling and/or removal of stains from the teeth	.	5
Teeth otherwise conserved	77	.
Teeth Root filled	.	1
Inlays	.	2
Crowns	.	.
Number of courses of Treatment completed during the year:	20	7
<u>Part B. Prosthetics</u>		
No dentures were provided	.	.
<u>Part C. Anaesthetics</u>		
No General Anaesthetics were administered by the Dental Officer		
<u>Part D. Inspections</u>		
Number of Patients given first inspection during the year	23	7
Number of Patients who required treatment	20	7
Number of Patients who were offered treatment	20	7
<u>Part E. Sessions</u>		
Number of Dental Officer Sessions, (i.e. equivalent complete half days) devoted to maternity & child welfare patients:		
For Treatment	10	
For Health Education	2	

DISTRIBUTION OF WELFARE FOODS

	1956	1966	1956	1966	1956	1966	1956	1966
Issued during the Quarter ended	National Dried Milk		Cod Liver Oil		Vitamin A & D		Orange Juice	
	No. of Tins		No. of Bottles		No. of Pkts.		No. of Bottles	
March 31st.	5886	2335	593	79	133	39	2236	787
June 30th.	3574	2228	401	46	141	50	2653	659
Sept. 30th.	3496	1997	419	46	115	48	2512	704
Dec. 31st.	3534	1730	541	51	128	34	2128	690
	14,490	8,290	1,964	222	517	171	9529	2640

During the past ten years 1956-1966 there has been a decreasing number of families taking advantage of the Welfare Foods Scheme, i.e. National Dried Milk, 6,200 tins less; Cod Liver Oil 732 bottles less; Vitamin A & D Tablets, 346 packets less and Orange Juice, 6,689 bottles less.

THE NURSING SERVICES

HEALTH VISITING

Aspirations for a good service and ways and means of achieving it have been in the minds of many of us for the past year. Three reports have been published recently which will influence the work of the public health nurse. A Hospital Plan for England and Wales, Development of Health and Welfare Services, and the Field Work of the Family Doctor. All these emphasize the need for a joining of resources in order to give a good service to the community.

There is a possibility of some drastic changes in the administration of family care, but whatever changes there are, nothing can alter the fact that the General Practitioner and the Health Visitor together form the first line of defence against disease, and the first line of support to families in need, and they are also the first to recognise signs of early breakdowns and the first to refer cases to specialised workers where necessary.

The appointment of a new Health Visitor to Rhayader in October freed the fifth Health Visitor for her new duties which include skin testing the school children for tuberculosis. She attended a course of instruction in Cardiff during November and visited every school during the year. It is proposed to carry out tuberculin testing each year. Miss Cole is also relief Health Visitor for the county.

Some encouragement to the people who try to dissuade school-children from smoking was given recently in the daily press. It stated there had been a small but significant drop in the number of people smoking. What a wonderful encouragement it will be when we see the figures of the deaths from lung cancer drop.

MENTAL HEALTH

The peculiar stresses of modern civilised living seem to be responsible to a large extent for mental disorders. Members of the staff attended refresher courses during the year and heard psychiatrists stress the importance of accepting those who have been mentally ill back into the community.

Mental Health work continued to take up a considerable amount of the Health Visitors' time. Not only the patient but the relatives need considerable support to enable them to cope with the present trend of treating a larger proportion of mentally disturbed people in their own homes. The very good liaison between the Mid-Wales Hospital and the Health Visitors is most helpful. The monthly study day increased her ability to help her patient and the review of all the patients in her care may bring forth another method of approach to the patients' benefit.

HOME NURSING

It seems almost an impertinence to remind you that ours is an ageing population. With the increased expectation of life, it follows that a number of patients suffering from haemoplegia, fracture of neck of femur, osteo arthritis of limbs, accidents in the home, etc. need the help of the District Nurses, and the greatest proportion of our work is with the aged. The number of visits paid to the over 60's increased - every single home visited presents a ready made opportunity to advise the family on matters of health, on rehabilitation, on early ambulation. The provision of new and improved disposable equipment enables the nurse to give more and more of her time, knowledge and experience to promoting better health. The continuity of staff is equally important and we have been fortunate in having a full complement of nursing personnel in 1966.

MIDWIFERY SERVICE

The number of live births in the county dropped again from -

308 in 1964

214 in 1965

203 in 1966

The domiciliary cases went up slightly, being 38 against 33 in 1965. The low number of mothers delivered in their own homes continued to cause concern, both to the administrative staff and the midwives, who felt that they were losing the most enjoyable part of their work. This is, however, a problem throughout Wales but we are now working towards a solution.

Entonox analgesia was available to domiciliary mothers during 1966 and was found to be a considerable improvement over the gas/air machine.

In the fight against infection, disposable gloves, caps, masks, syringes and mucus extractors have played a valuable part.

The only figures which showed an increase were to patients delivered in hospital and discharged before the 10th. day. The number of visits to these patients were:

1964	1965	1966
331	375	489

LIBRARY

A Library is maintained in the Health Department and staff can avail themselves of up to date literature. The library has been completely re-catalogued, making the recording of books borrowed much simpler. A book recently published and purchased for the library is a Survey on District Nursing called "Feeling the Pulse". It is a study of District Nursing in six areas and we have no reason to feel complacent with its findings.

Throughout the year, our own services have been supported by other Local Authority services, such as the Home Help Service, a service on which the domiciliary health and welfare services as a whole increasingly depend for their proper functioning, domiciliary Occupational Therapist, with it's Voluntary Aid Detachments and a host of Voluntary Bodies whose aim it is to be of service to others. The building of flats, bungalows for old people. The completion of Hafan and Wylesfield has made an impact on the community and on our work.

LOANS FOR THE HANDICAPPED

There is now a very comprehensive supply of equipment available, from small things like lazy tongs to large hoists. Much of the equipment is on loan for long periods, as it makes a world of difference to a handicapped person and enabled them to lead a more independent life.

"AT RISK" REGISTER

The register continues to grow appreciably as Midwives and Health Visitors become more used to recognising the conditions which place a child at risk. The red disc on the health visiting card is an ever present sign that an additional watch should be kept on that child.

STATISTICS ON WORK OF THE NURSING STAFF

Work of the Superintendent Nursing Officer

No. of routine Inspection of Nurses.....	33
No. of special visits to Nurses.....	25
No. of other visits.....	37
No. of visits to Nursing Homes.....	6
No. of visits to Hospital.....	15
No. of visits to Child Welfare Centres.....	13
No. of visits to Home Helps.....	87

Home Nursing

No. of new patients visted.....	1144
Total No. of Nursing Visits.....	20263

Midwifery

No. of cases attended.....	83
No. of maternity and midwifery visits..	1263
No. of ante-natal visits to domiciliary and institutional patients.....	1866
No. of post-natal visits to domiciliary and institutional patients.....	112
Visits made to cases where the birth occurred in hospital but where the mother and child were discharged home before the 10th day	489
No. of attendances at medical practitioners ante-natal clinics	280

Health Visiting

No. of children visited who were aged between 0-5 years.....	1185
No. of visits made to the above children.....	5680
No. of visits to physically-handi- capped persons.....	397
No. of visits to tuberculous patients.	95
No. of visits to persons over 65 years of age.....	881
No. of other visits.....	1268
No. of talks given on Health Education	10
No. of people who attended during the year.....	60
No. of attendances at Parentcraft and Group Teaching Classes.....	290
No. of visits to expectant mothers....	25

Mental Health

No. of visits to patients.....	438
--------------------------------	-----

Clinics

No. of attendances at Infant Welfare Clinics	186
No. of attendances at General Practitioners' Baby Clinics	49
No. of attendances at National Insurance and Ophthalmic Sessions.....	34
No. of attendances at Immunisation Sessions (at home and specials).....	69
No. of Geriatric Clinics.....	7

SECTION 26 - VACCINATION & IMMUNISATION

The following is a summary of the numbers vaccinated or immunised in 1966, including re-inforcing injections:

Completed Primary Courses

Type of Vaccine or dose	Year of Birth					Others under Age 16	Total
	1966	1965	1964	1963	1962-59		
Diphtheria	78	157	33	14	1	3	286
Whooping Cough	72	141	29	12	-	-	254
Tetanus	78	157	33	14	1	3	286
Poliomyelitis	65	169	41	5	14	14	308

Re-inforcing Doses

Diphtheria	-	33	84	16	20	66	219
Whooping Cough	-	31	64	13	8	16	132
Tetanus	-	33	84	16	20	65	218
Poliomyelitis	-	25	40	14	25	90	194

Smallpox Vaccination

	Age at date of Vaccination							Total
	0-3 mths.	3-6 mths.	6-9 mths.	9-12 mths.	1 yr.	2-4 yrs.	5-15 yrs.	
Number vaccinated	1	-	2	5	96	27	1	132
No. re-vaccinated	-	-	-	-	-	1	8	9

Statistical Summary of Vaccination and Immunisation

Percentage of children vaccinated at 31st December, 1966

	<u>Born in 1964</u>			<u>Born in 1965</u>		
	<u>Radnor</u>	<u>Wales</u>	<u>England & Wales</u>	<u>Radnor</u>	<u>Wales</u>	<u>England & Wales</u>
Whooping Cough	88	70	74	75	69	72
Diphtheria	96	71	76	85	70	73
Poliomyelitis	73	72	72	82	61	68
Smallpox (children under 2 yrs.)				38	28	38

NATIONAL HEALTH SERVICE ACT. 1946

SECTION 27 - AMBULANCE SERVICE

Statistics for 1966 are as follows:

<u>Ambulance</u>	<u>No. of Journeys</u>	<u>Mileage</u>	<u>Type of Case</u>	
			<u>Illness</u>	<u>Accident</u>
Knighton	113	6,769	99	18
Llandrindod Wells	201	9,106	183	25
Presteigne	118	4,360	132	6
Rhayader	79	4,135	72	11
Totals:	511	24,135	486	60

Total Annual Mileage:

<u>Year</u>	<u>Ambulances</u>	<u>Sitting-case cars</u>	<u>All Vehicles</u>	<u>Increase or Decrease on previous year (per cent)</u>
1950	13,676	47,466	61,142	+ 35.9
1951	16,949	58,226	75,175	+ 22.9
1952	13,989	61,500	75,489	+ 0.4
1953	16,029	65,867	81,896	+ 8.4
1954	16,303	76,022	92,325	+ 12.7
1955	20,580	85,935	106,515	+ 15.4
1956	19,413	128,265	147,678	+ 38.6
1957	17,490	107,652	125,142	- 15.4
1958	17,003	107,053	124,056	- 0.9
1959	18,774	111,498	130,272	+ 5.0
1960	16,544	144,267	160,811	+ 23.4
1961	20,452	162,795	183,247	+ 13.9
1962	21,641	168,732	190,373	+ 3.9
1963	21,704	179,678	201,382	+ 5.8
1964	23,811	206,837 $\frac{1}{2}$	230,648 $\frac{1}{2}$	+ 14.5
1965	24,080	227,873 $\frac{1}{2}$	251,953 $\frac{1}{2}$	+ 8.5
1966	24,370	236,801 $\frac{1}{2}$	261,171 $\frac{1}{2}$	+ 3.7

In 1966 ambulance vehicles did 1,331 miles per 1,000 of the population compared with 1,320 in 1965, while sitting-case cars covered 12,939 as against 12,493 in 1965. The number of journeys per 1,000 of the population made by ambulance vehicles was 28 compared with 26 in 1965, and by sitting-case cars 306 compared with 274 in 1965. The total number of journeys made by sitting-case cars was 5,594.

The mileage covered by both ambulances and sitting-case cars continued to increase during 1966 but the increase of 3.7% was the lowest for three years.

The increases are very largely due to the additional out-patient facilities at such hospitals as Hereford, Shrewsbury, Aberystwyth and Cardiff. It is significant that due to the geography of Radnorshire in relation to the larger hospitals, average journey covered in 1966 by ambulances was 47 miles and by sitting-case car by 42 miles.

Owens Motors, Ltd., took over the running of the ambulance station at Knighton on the 1st January, 1966 and have done very well. During the year, however, Mr. Owen found difficulty in obtaining the services of "day-time" ambulance drivers. An advertisement in the local press and the display of posters in Knighton proved successful and we obtained the services of two experienced drivers.

During the year a decision was made to purchase a new Land-Rover ambulance for the Knighton Ambulance Station and for the "second-line" vehicle at Llandrindod Wells, (a 1953 Morris) to be traded in "in part-exchange". On arrival of the new ambulance, the 1957 Morris from Knighton would then be transferred to Llandrindod Wells for use as a "second-line" vehicle. In August tenders were invited for the new Land-Rover which was actually taken into service in May, 1967.

In our original 10 year plan for the development of Local Health Authority Services, Radio Control of ambulances was planned to take place between the years 1968/72. Radnorshire is one of the last ambulance services in the country without radio control. The cost of establishing radio control would be high because of the expense of building a transmitting station and the possible laying of land lines etc.

It was decided that exploratory discussions be held with representatives of the Home Office and the Radnorshire and North Breconshire Water Board. It was not possible to make use of the police radio transmitter in the area but enquiries with the Water Board revealed that installation of radio control of their vehicles was under consideration and the installation had been agreed in principle by the Board.

An estimate was obtained by the Water Board from Pye Telecommunications Ltd., which showed that the total cost to the Local Health Authority will be £1,240 for the first year (which includes initial installation costs) and £200 for each year thereafter.

Although, as mentioned, it was planned to introduce radio control during the period 1968/72, the Council agreed in principle to implement the proposals during the financial year 1968/69.

The period of contract for the Sitting-case Car Service scheme was increased from two to three years and became effective from the 1st. January, 1966.

HEALTH EDUCATION

Talks were given by the health visitors to groups of people as required.

The slow steady improvement in hygiene and dietary habits goes on, with encouragement from health visitors at routine visits.

It is not until one looks back some twenty years, that one realises the vast improvement there has been. Most of the rural areas have now been connected up to electricity, with its many advantages to the housewife. Health Visitors have often been consulted on the best type of cooker or washing machine.

Some encouragement to the people who try to dissuade schoolchildren from smoking, was given recently in the daily press. It stated there had been a small but significant drop in the number of people smoking. What a wonderful encouragement it will be when we see the figures from Lung Cancer begin to drop.

PREVENTION OF TUBERCULOSIS

The following statistics have been supplied by the Chest Physician:

	<u>1962</u>	<u>1963</u>	<u>1964</u>	<u>1965</u>	<u>1966</u>
No. of cases notified	11	3	5	9	2
No. of cases transferred into the county	-	-	1	2	3
No. of contacts examined	37	33	40	37	7
No. of contacts given B.C.G.	9	7	7	10	4

The total number of patients referred for the first time to Llandrindod Wells Clinics during 1966 was 182.

The total number of attendances at the Llandrindod Wells Chest Clinic during 1966 was 382."

The following table shows the total number of cases on the register at the end of the year.

Age Periods	Respiratory		Non-Respiratory		All Forms	
	M	F	M	F	M	F
0-	-	-	-	-	-	-
1-	-	-	-	-	-	-
2-	-	-	-	-	-	-
5-	-	-	-	-	-	-
10-	3	-	-	-	3	-
15-	-	-	-	-	-	-
20-	-	4	-	-	-	4
25-	1	5	-	-	1	5
35-	1	4	1	2	2	6
45-	5	2	2	3	7	5
55-	8	3	2	1	10	4
65-	1	3	-	-	1	3
75-	-	-	1	1	1	1
Total	19	21	6	7	25	28

The following table shows the number of new cases during the year

Age Period	New Cases				Deaths			
	Respiratory		Non-Respiratory		Respiratory		Non-respiratory	
	M	F	M	F	M	F	M	F
0-	-	-						
1-	-	-						
2-	-	-						
5-	-	-						
10-	-	-						
15-	-	-						
20-	-	-						
25-	-	-						
35-	-	-						
45-	1	-						
55-	1	-						
66-	-	-			2	-		
75+	-	-						
Total	2	-			2	-		

Three women (aged 33, 25 and 22 years) suffering from respiratory tuberculosis transferred into the county from other areas. Before the end of one year, however, the woman aged 25 years had recovered and the one aged 33 left the county. Their names were, therefore, removed from the register.

B.C.G. Vaccination

The scheme for the protection of children against tuberculosis by B.C.G. vaccination continued to include the following groups:

1. School children approaching the age who could conveniently be vaccinated with others of that age.
2. 13-14 year old children.
3. Children of 14 years of age or older not previously protected.

The results of the scheme during the year were as follows:

	<u>Groups</u>			Totals
	(1)	(2)	(3)	
No. of children eligible	9(1)	211(6)	40	260(7)
No. of consents	9(1)	179(6)	37	225(7)
No. of parents refused	-	32	3	35
No. Tuberculin tested	9(1)	174(6)	35	218(7)
No. found to be negative reactors and vaccinated	7(1)	163(5)	34	204(6)
No. found to be tuberculin positive	1	4(1)	-	5(1)

The parents of seven children from other areas attending the Residential School for the Deaf consented to vaccination with B.C.G. if found necessary. Statistics concerning these children are shown in the table above in parenthesis. The percentage of parents consenting to this protection was 86.5

The percentage of children found to be tuberculin positive was as follows:

	<u>Groups</u>			Totals
	(1)	(2)	(3)	
All children	10.0	2.8	-	2.7
Radnorshire children	1.1	2.3	-	2.3
Residential School Children	-	16.6	-	13.2

The percentage of Radnorshire children between 13-14 years of age found to be tuberculin positive during the last five years are as follows:

1962	7.9
1963	7.9
1964	4.7
1965	7.4
1966	2.3

CHIROPODY SERVICES

-The chiropody service is provided on behalf of the County Council by the County of Radnor Old People's Welfare Committee.

Miss D. A. Payne, the Honorary Secretary of the County of Radnor Old People's Welfare Committee writes as follows:

"The Chiropody Service in the county ceased to function temporarily (with the exception of Knighton) on September 29th., owing to the resignation of the Chiropodist. To the 500 patients in the County this has caused great disappointment. This so beneficial service is highly valued.

At the eight established clinics persons from over 50 towns and villages were treated. A domiciliary service was also fulfilling an urgent need.

HOME HELP SERVICE - SECTION 29

The number of visits in connection with the Home Help service was 1,481.

There were 59 households supplied during the year with home help services.

Fifty-seven of our home helps are part-time and the types of cases helped were elderly, under psychiatric care, arthritic, disseminated sclerosis, cancer and blind.

MENTAL HEALTH SERVICES

For the purpose of the Mental Health Act, 1959, which became operative in November, 1960, the district nurses and health visitors were appointed as Mental Welfare Officers, and they continued in this capacity in 1966. As reported in previous Annual Reports, this domiciliary work is mainly carried out by the Health Visitors and is undertaken efficiently.

The Brecon Junior Training Centre was opened on the 5th September, 1966. Five Radnorshire mentally subnormal children attend by arrangement with the Breconshire Local Health Authority. The parents have all expressed their appreciation of this service and the children appear to have benefitted from attendance. We are grateful to the Breconshire Local Health Authority for allowing Radnorshire children to attend.

Psychiatric Clinic

Dr. Gordon Diggle, the Superintendent of the Mid-Wales Hospital, and our adviser in Mental Health, contributes the following report:

Mental Illness

"As in previous years, substantially the whole of the services for dealing with the patients in Radnorshire suffering from Mental Illness have been provided by the Mid-Wales Hospital, Talgarth and its staff.

A small part of the Eastern fringe of the county, mainly the area centring on Presteigne is served by St. Mary's Hospital, Burghill, Hereford. A weekly O.P. Clinic is held at the County Hall, Llandrindod Wells. Average attendance is two new patients and ten old patients per session, although naturally the number varies slightly from week to week. Visits to Homes in the County were made when requested. It is impossible to give statistics for these clinics and visits as, in practice, a considerable number of patients from Breconshire are seen at the Clinic and the hospital.

The major problem during the year has been the provision of satisfactory accommodation for female, elderly, confused patients. As in all areas, the number of patients suffering from this type of illness is steadily increasing. They require intense nursing care and there is an increasing shortage, both of suitable accommodation and this hospital has had to refuse admissions of this type of case, who, by any reasonable standard should have been admitted, as there was simply no accommodation available. The situation would appear likely to become worse and no satisfactory solution appears to be in sight.

Services for Subnormality

During 1966, arrangements were made as previously - normal patients not requiring hospital accommodation were supervised by the

County Medical Officer and his staff while the patients requiring in-patient accommodation were admitted through a central bed bureau maintained by the Hospital Board. During 1967, this has been modified so the hospitals for the subnormals each have a defined catchment area. Radnorshire has been included in the area served by Llanfrehfa Grange, Cwmbran."

Miss Gwendoline Morgan, our Psychiatric Social Worker reports as follows:

"Day'conferences held each month at Talgarth have provided a meeting ground for local Authority and hospital staff who deal with the care of the mentally sick. Lectures in psychiatric medicine and case conferences in which the needs of each individual is reviewed, ensure that everyone dealing with the after care of the mentally sick are conversant with current methods and trends of therapy. Co-operation and co-ordination between county and hospital authorities remains extremely sound and a good working team has evolved which is capable of dealing with the needs and problems of mental ill-health in Radnorshire. The psychiatric out-patient clinic based at Llandrindod Wells not only enables medical follow up to be achieved, but also acts as a source of reference and advice for county workers dealing with after-care problems.

ANALYSIS OF WORK DONE IN 1966

No. admitted to Mid-Wales Hospital (of which 15 were re-admissions)	28 Males
No. admitted to Mid-Wales Hospital (of which 10 were re-admissions)	24 Females
No. discharges	20 Males
No. discharges	22 Females
No. who received after-care	109
No. after-care visits by me	356
No. kindred social work visits by me	56"

NATIONAL ASSISTANCE ACT, 1948
SECTIONS 29 & 30

WELFARE OF THE BLIND AND PARTIALLY SIGHTED

Eight new cases (5 men and 3 women) were registered as blind. Twelve blind persons died (9 men and 3 women) and three (1 man and 2 women) left the area. One blind man transferred into the county and on the recommendation of a consultant ophthalmic surgeon a woman's name was removed from the register.

Two persons (1 man and 1 woman) were registered as partially-sighted. Both were 82 years of age.

Register of Blind Persons

<u>Age</u>	<u>Male</u>	<u>Female</u>	<u>Total</u>
0-15	1	-	1
16-20	-	-	-
21-29	1	-	1
30-39	1	1	2
40-49	-	1	1
50-59	2	3	5
60-69	7	4	11
70-79	10	7	17
80-89	7	12	19
90+	2	4	6
	31	32	63

Register of Partially-sighted Persons

<u>Age</u>	<u>Male</u>	<u>Female</u>	<u>Total</u>
0-15	-	1	1
16-20	1	1	2
21-29	-	-	-
30-39	-	-	-
40-49	-	-	-
50-59	-	-	-
60-69	-	1	1
70-79	1	2	3
80-89	1	2	3
90+	-	-	-
	3	7	10

Follow-up of Registered Blind and Partially-sighted Persons

No. of cases registered during the year in respect of which Forms B.D.8 recommended:	Central Retinal Artery Occlusion & Retinal Cyst	Chronic Haemorrhages	Chronic Glaucoma	High Myopia	Retinal Degeneration and Myopia	Senile Cataracts	Senile Cataracts & Senile Macula Degeneration	Senile Macula Degeneration
(a) No. Treatment	0	1	1	1	1	1	1	1
(b) Medical	0	0	0	0	0	0	0	0
(c) Surgical	0	0	0	0	1	1	1	0
(d) Optical	0	0	0	0	0	0	0	0
(e) Ophthalmic Medical Supervision	1	0	1	0	0	0	0	1

No cases of ophthalmia neonatorum occurred during the year.

Mr. Richard Oldbury, our Home Teacher for the Blind reports as follows:

"As is the custom all blind and partially sighted people in the county were visited regularly, particularly those who are living alone.

Owing to retirement, the number of blind people working in the county was reduced by one to four.

One young man was registered blind in the county in December, and immediately application was made for his rehabilitation at America Lodge, Torquay. In the meantime, I commenced instruction in braille and craft work. He retains his interest in gardening and was made a member of the Guild of Blind Gardeners.

Instruction has also been given in the use of all types of specialised equipment, aids and games.

The Talking Book Service continues to be a success and all blind persons in need of a machine have one. It is a help by the fact that I am able to demonstrate with my own machine before an application is made to the library.

Both craft classes continue to be a success and are well attended. The blind and physically handicapped people mixing together and helping each other.

During the year articles made by the blind were sold privately or at the Royal Welsh, the Radnorshire County or Newbridge-on-Wye Shows. The variety of articles made continues to increase and the quality of these articles continues to improve.

At the request of the Ministry of Social Security, blind and partially sighted are visited prior to registration."

Mrs. C. H. Medlicott, the Honorary Secretary of the Radnor Association for the Blind reports as follows:

"A garden party was held at Cefndyrys and an outing organised to Aberystwyth, and both were well attended.

£4 each was given to our 67 blind and partially sighted persons in the county at Christmas. Grants were made towards holidays."

Mrs. P. Richards, our Craft Instructress reports as follows:

"During the past year I am pleased to report that in both Knighton and Llandrindod Wells there has been a great increase in the attendance of the Handicraft classes. Attendance figures in September, 1965 were down to as low as 2 or 3 people a class, but now the figures are in the region of 17 - 20 people a class.

I have persevered with new ideas in the area, such as leatherwork, ceramic tiling, lampshade making, etc. rather than the mundane dishcloth knitting, and this has proved very rewarding.

I feel that with the introduction of more difficult and varied crafts a greater interest is shown by the disabled as they tend to feel that they are participating in the making of saleable articles.

The articles made, as shown by our experience at the Royal Welsh Show this year, command a ready sale.

However, I realise that the disabled attend the classes now not only to participate in the making of handcrafts, but to enjoy the companionship of others, as many of these people spend so much time alone."

Physically Handicapped Persons

The following table shows the number of physically handicapped persons on the register at the end of the year.

	M	F	Total
Group "A" (Capable of work under ordinary industrial conditions)	8	2	10
Group "B" (incapable of work under ordinary industrial conditions but capable of work in sheltered workshops)	4	1	5
Group "C" (capable of work at home only)	10	34	44
Group "D" (incapable of, or not available for work)	2	9	11
Group "E" (children under the age of 16 years)	4	2	6
	28	48	76

The following table shows the age groups of the 76 persons on the register of physically handicapped persons.

	M	F	Total
0-15	4	2	6
16-20	4	-	4
21-29	-	1	1
30-39	-	4	4
40-49	2	3	5
50-59	5	8	13
60-69	6	13	19
70-79	4	11	15
80-89	1	7	8
90-99	-	1	1
	26	50	76

The following table shows the classification of physically handicapped persons and the number registered according to their disability.

Classification		Group					Total
		"A"	"B"	"C"	"D"	"E"	
A/E	Amputation	3	-	3	1	-	7
F	Arthritis and rheumatism	-	-	23	7	-	30
G	Congenital malformation and deformities	-	-	-	-	2	2
H/L	Diseases of digestive, genito-urinary, heart or circulatory and respiratory systems (other than tuberculosis) and diseases of the skin	1	-	1	-	-	2
Q/T	Injuries of the head, face, neck, thorax, abdomen, pelvis or trunk. Injuries or diseases (other than tuberculosis) of upper and lower limbs and of the spine	-	1	1	-	-	2
V	Organic nervous disease	5	2	12	2	4	25
U/W	Neurosis, pschoses and other nervous and mental disorders not included in V	-	2	1	-	-	3
X	Tuberculosis (respiratory)	-	-	-	-	-	-
Y	Tuberculosis (non-respiratory)	1	-	-	-	-	1
Z	Diseases and injuries not specified above	-	-	3	1	-	4
		10	5	44	11	6	76

WELFARE OF THE DEAF

At the end of the year 25 persons were registered as deaf with and without, speech or "Hard of Hearing". Of this number 15 (60%) were over the age of 65. The number on the register was as follows:

	<u>Children</u> <u>under 16 years</u>		<u>Persons</u> <u>aged 16-64</u>		<u>Persons aged</u> <u>65 and over</u>	
	M	F	M	F	M	F
Deaf with speech	-	-	2	2	1	2
Deaf without speech	-	-	1	1	-	2
Hard of Hearing	-	-	2	2	2	8

All people on the register are visited by a trained worker employed by the Chester & North Wales Society for the Deaf for which the County Council makes an annual grant.

WELFARE SERVICES FOR OLD PEOPLE

The County Council's duties and functions under Part III of the National Assistance Act, 1948, have been outlined in previous reports and the provision in the county of accommodation for 50 old people has also been described previously.

This accommodation comprises two twenty bedded homes, in Knighton and Llandrindod Wells, and a ten bedded home in Rhayader. The work of caring for the aged continued satisfactorily.

MEALS ON WHEELS

Miss D. A. Payne, M.B.E., the Honorary Secretary of the County of Radnor Old People's Welfare Committee writes as follows:

"Established early in 1965, the service continues to work satisfactorily. Meals are cooked in school kitchens and delivered by voluntary helpers to about 30 persons.

In September 1966 it was possible to increase the meals to two per week.

On the occasions when meals are served during school holidays, Matron's of Old People's Homes arrange for cooking."

INFECTIOUS DISEASES

The following 37 cases of notifiable infectious diseases were notified during the year by the District Medical Officers of Health to the County Medical Officer:

Disease	Knighton	Llandrindod Wells	Presteigne	Total Urban	Colwyn	Knighton	New Radnor	Painscastle	Rhayader	Total Rural	Total County
Acute Pneumonia	-	3	-	3	-	-	-	-	1	1	4
Measles	-	25	1	26	2	-	2	-	-	4	30
Scarlet Fever	-	-	-	-	-	3	-	-	-	3	3

VENEREAL DISEASE

Patients in need of treatment are referred to clinics at Hereford or Shrewsbury. The number of cases and attendances are as follows:

		<u>Hereford</u>		<u>Shrewsbury</u>	
		M	F	M	F
Syphilis	Cases	-	-	1	-
	Attendances	-	-	1	-
Gonorrhoea	Cases	-	1	-	-
	Attendances	-	1	-	-
Other Conditions					
	Cases	2	1	-	-
	Attendances	2	1	-	-

PUBLIC HEALTH LABORATORY SERVICE

As there is no Public Health Laboratory in the County, specimens for bacteriological examination are sent to Hereford or Shrewsbury and water and other samples requiring chemical analysis are sent to Mr. D. C. Jenkins, the Public Analyst at Carmarthen.

FOOD & DRUGS ACT, 1955

This work is undertaken by the Inspector of Weights and Measures, Mr. R. W. Price, who is also Inspector under the Food & Drugs Act.

TABLE I

Causes of death in Administrative areas in the County of Radnor for
1966

Causes of Death	Urban Districts						Rural Districts										County		Total
	Knighton		Llandrindod Wells		Presteigne		Colwyn		Knighton		New Radnor		Painscastle		Rhayader		M	F	
	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	
Tuberculosis, respiratory	1	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	2	-	2
Syphilitic Disease	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	1	1
Other Infective & Parasitic Disease:	-	-	-	-	-	-	-	-	-	1	-	-	-	-	-	-	-	1	1
Malignant Neoplasm, Stomach:	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	1	1
Malignant Neoplasm, lung, bronchus:	1	-	5	-	-	-	-	-	-	-	1	-	-	-	2	-	9	-	-
Malignant Neoplasm, uterus:	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	1	-	2	2
Other Malignant & Lymphatic neoplasm:	2	-	2	3	-	-	-	1	1	2	-	-	3	-	4	-	12	6	18
Leukaemia, aleukemia:	-	-	-	-	-	-	1	-	-	-	-	-	1	-	-	-	2	-	2
Vascular lesions of nervous system:	3	6	4	8	1	1	1	-	5	3	2	1	2	3	5	8	23	30	53
Coronary Disease, angina:	4	1	7	9	2	1	4	3	5	3	2	-	3	2	4	3	31	22	53
Hypertension with heart disease:	-	-	-	1	-	-	-	-	-	-	1	2	-	1	1	-	2	4	6
Other Heart Disease:	1	-	3	2	-	2	1	3	-	1	1	2	-	3	3	7	9	20	29
Other Circ. Disease:	1	-	-	2	-	-	1	-	1	1	1	-	-	1	3	2	7	6	13
Influenza:	-	-	-	-	-	1	-	-	-	1	-	-	-	-	-	1	-	3	3
Pneumonia:	-	-	-	-	-	-	-	-	-	-	-	1	-	1	-	-	-	2	2
Bronchitis:	-	1	2	-	-	-	1	-	-	-	-	-	-	-	1	-	4	1	5
Other diseases of respiratory system:	-	-	1	-	-	-	-	-	-	-	1	-	-	-	-	1	2	1	3
Ulcer of stomach & duodenum:	-	-	-	1	-	-	-	-	-	-	1	-	-	-	-	-	1	1	2
Nephritis & Nephrosis:	-	-	-	-	1	-	-	-	-	-	-	-	-	-	-	-	1	-	1
Hyperplasia of prostate:	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	1	-	1
Congenital Malformations:	-	-	-	-	-	-	1	-	-	-	1	-	-	-	-	-	2	-	2
Other defined and ill-defined diseases:	1	1	1	5	2	1	-	-	2	1	-	-	1	-	3	3	10	11	21
Motor vehicle accidents:	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-	-	1	-	1
All other accidents:	1	-	-	1	-	-	-	-	1	1	-	-	-	-	3	-	5	2	7
Suicide:	-	-	1	-	1	-	1	-	-	-	-	-	-	-	-	-	4	-	4
Total all causes:	15	9	26	32	7	6	11	7	16	14	12	7	10	11	31	128	128	144	242

TABLE II
Causes of Death at the various periods of life in the County of Radnor
1966
Aggregate of Rural Districts

Aggregate of Rural Districts																		
Causes of Death	All		under	4	wks	wks	to	1	5	15	25	35	45	55	65	75	M	F
	Ages																	
	M	F																
Tuberculosis, Respiratory:	1	1															1	1
Syphilitic Disease:	1	1																1
Other Infective & Parasitic Disease:	1	1																
Malignant Neoplasm, Stomach:	1	1															1	1
Malignant Neoplasm, Lung, Bronchus:	3	1									1						1	1
Malignant Neoplasm, Uterus:	1	2													1			1
Other Malignant & Lymphatic neoplasms:	8	3									1		1		2		2	3
Leukaemia, aleukaemia:	2	1						1									1	1
Vascular lesions of nervous system:	15	15												1	2		6	6
Coronary Disease, Angina:	18	11												2		4	3	5
Hypertension with Heart Disease:	2	3												1			1	3
Other Heart Disease:	5	16												1			4	5
Other Circulatory Disease:	6	4																6
Influenza:	1	2												1				1
Pneumonia:	1	2																1
Bronchitis:	2	1														2		
Other Diseases of Respiratory System:	1	1														1	1	
Ulcer of Stomach & Duodenum:	1	1														1		
Nephritis & Nephrosis:	1	1																
Hyperplasia of Prostate:	1	1															1	
Congenital Malformations:	2	1			2													
Other defined & Ill-defined disease:	6	4	1											1	2		1	1
Motor Vehicle Accidents:	1	1										1						
All other accidents:	4	1					1		1		1					1		1
Suicide:	2	1												1				1
Total all causes	80	67	1		2		2		1		3		2		3	5	12	4
																	20	23
																	34	35

TABLE II

Causes of Death at the various periods of life in the County of Radnor

1966

Aggregate of Urban Districts

Causes of Death	All Ages		0-		1-		5-		15-		25-		35-		45-		55-		65-		75-	
	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F
Tuberculosis -																						
respiratory	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
Syphilitic Disease	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
Other Infective & Parasitic Diseases	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
Malignant Neoplasm, Stomach:	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
Malignant Neoplasm, Lung, Bronchus:	6	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	2	1	4	1	1	1
Malignant Neoplasm, Uterus:	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
Other Malignant & Lymphatic Neoplasm:	4	3	1	1	1	1	1	1	1	1	1	1	1	1	1	1	2	1	1	1	1	1
Leukaemia, Aleukaemia:	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
Vascular lesions of Nervous System:	8	15	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	2	1	6	3
Coronary Disease, Angina:	13	11	1	1	1	1	1	1	1	1	1	1	1	1	1	1	3	2	3	3	6	6
Hypertension with Heart Disease:	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
Other Heart Disease:	4	4	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	4	1	2
Other Circulatory Disease:	1	2	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	2	2
Influenza:	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
Pneumonia:	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
Bronchitis:	2	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
Other Diseases of Respiratory System:	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
Ulcer of Stomach & Duodenum:	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
Nephritis & Nephrosis:	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
Hyperplasia of Prostate:	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
Congenital Malformations:	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
Other defined and ill-defined diseases:	4	7	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	2	2	3
Motor Vehicle Accidents:	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
All other accidents:	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
Suicide:	2	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
Total all causes	48	47	1	1	1	1	1	1	1	1	1	1	1	1	2	1	7	6	14	9	23	30

TABLE III

Area	Live Births			Still Births	
	No. 1966	Birth Rates 1966 1962-66		No. 1966	Rates per 1,000 live and still Total births
Urban Districts:					
Knighton	31	16.6	16.7	-	-
Llandrindod Wells	36	11.4	14.3	-	-
Presteigne	17	13.8	16.4	-	-
Rural Districts:					
Colwyn	14	8.7	14.1	-	-
Knighton	33	12.3	14.4	1	29.4
New Radnor	25	12.2	14.9	-	-
Painscastle	24	14.7	11.4	-	-
Rhayader	49	11.9	14.4	-	-
Urban Districts	85	13.4	15.4	-	-
Rural Districts	145	12.0	14.1	1	6.1
County	229	12.5	14.5	1	4.3

TABLE IV

Area	No. of Deaths 1966	Crude Death Rates	
		1966	1962-66
Urban Districts:			
Knighton	24	12.8	18.1
Llandrindod Wells	58	18.4	17.4
Presteigne	13	10.5	11.1
Rural Districts:			
Colwyn	18	11.1	13.0
Knighton	30	11.1	12.2
New Radnor	19	9.3	10.6
Painscastle	21	12.8	10.7
Rhayader	59	14.4	12.3
Urban Districts	95	15.2	16.4
Rural Districts	147	12.2	11.7
County	242	13.2	13.2

PART II

ANNUAL REPORT OF THE

PRINCIPAL SCHOOL MEDICAL OFFICER

MEDICAL INSPECTIONS

In 1966, there was an increase in the number of parents who attended the examinations of their children; the figure for this year being 55.7% compared with 47.8% in 1965.

During the year, 756 children were examined in the respective age groups compared with 609 in the previous year. In addition, 19 children were given special inspections as against 43 in 1965.

CO-OPERATION WITH FAMILY DOCTORS

The recommendation of the Joint Committee of the British Medical Association and the Society of Medical Officers of Health were adopted, as in previous years, with regard to children found at school medical examinations to be suffering from defects other than those with defects of refraction. A letter about such children is sent from the Principal School Medical Officer to the medical practitioner concerned.

PRINCIPAL FINDINGS AT MEDICAL INSPECTIONS

Infestation

The number of children whose heads were found to be infested with lice was 6 compared with 26 for 1965 and the percentage of children found to be so infested was 0.1.

The actual numbers of children found to be infested during the last ten years are given below.

1957	51	1962	66
1958	31	1963	37
1959	13	1964	17
1960	13	1965	26
1961	71	1966	6

Skin

One of the 3 children found at school medical inspection to require treatment for defects of the skin was suffering from Impetigo and 2 were suffering from Ringworm of the body. No case of Ringworm of the scalp was seen.

Teeth

Advice on the prevention of dental decay was again given at medical inspections and leaflets to the parents when necessary.

Eyes

One school entrant was found during the year to require treatment for defective vision, as compared with five in 1965, and seventeen children of the other age groups were found to be suffering from defective vision. All these children were referred for refraction to the School Ophthalmic Surgeon. Seventy-three other children were kept under observation.

In addition three children were found to be suffering from squint and they also were referred for treatment to a Consultant Ophthalmic Surgeon.

Ears, Hearing

One child was found to be suffering from ear disease and was recommended for treatment.

Those children found to have defective hearing were tested by a Pure Tone Audiometer at the Llandrindod Wells Residential School for the Deaf. I should like to express my thanks to the Headmaster of this school for his kind help in this matter.

Nose and Throat Conditions

Fifty-one children were found to have enlarged tonsils and adenoids, but only two of these were referred with the consent of the family doctor to a Consultant Ear, Nose and Throat Surgeon, for advice as to whether operative treatment was advised.

Conservative measures were adopted in other cases, particularly dental treatment, breathing exercises and measures to improve the general health.

Tonsillectomy

The following table shows the number of children seen at periodic medical inspection during the year, whose tonsils had been removed at some time prior to the examination. As indicated above, only two children had been referred by the School Doctors to a Consultant for decision as to whether the operation was required.

<u>Age Group</u>	<u>No. of children examined in each group</u>	<u>No. found to have had Tonsillectomy</u>	<u>%</u>
Entrants	311	4	1.3
Second Age Group	227	24	10.4
Third Age Group	218	17	7.8

Heart and Circulation

Three children showed evidence of anaemia or heart disease, but were not excluded from games or physical training.

Lungs

No child examined during the year at routine medical inspection was suspected of having pulmonary tuberculosis.

Orthopaedic Defects

No children were found to have poor posture. Four children who had 'flat' feet were recommended for treatment which usually entails raising the inner border of the heels of the shoes and doing remedial exercises. Three children were in need of treatment for other orthopaedic conditions.

Follow-up notices were sent to the school nurses for those children having orthopaedic defects, recommending the form of exercise necessary.

Physical Condition

On completion of the medical examination of a child, he or she is assessed on general health and placed in one of two classifications, namely, satisfactory or unsatisfactory. Seven children, that is 0.9% of all children examined, were considered to be in an unsatisfactory condition. Such assessment is very much a matter of personal opinion.

Partially-sighted Pupils

One partially-sighted pupil of school age continues to attend Ysgol Penybont Residential School, Bridgend.

Partially-Hearing Pupils

One partially-hearing pupil of school age attends Needwood School, near Burton on Trent, and another attends the Llandrindod Wells Residential School for the Deaf as a day pupil.

Educationally Sub-normal Pupils

Five children attend Residential Special Schools for Educationally Sub normal Pupils. Ten children in need of such

treatment remain unplaced Ascertainment of educationally-sub-normal pupils is incomplete The number requiring special educational treatment is considerably greater than the figures would suggest.

Physically Handicapped Pupils

A spastic boy from Knighton continues in attendance at the Graig-y-Parc Special School, Cardiff and is making good progress

A spastic 9 year old girl from Llangunllo attends Erw'r Delyn Residential School, Penarth.

Delicate Pupils

One child would benefit from residence in a School for Delicate Children, but the parents have refused consent.

Pupils with Speech Defects

Two children were found at Medical Inspection to have speech defects. Sixteen children now attend the Speech Therapy Clinic at Kington which is administered by the Herefordshire Education Committee

MEDICAL TREATMENT

Altogether 64 children at periodic inspection and 3 at special inspection were found to be suffering from defects considered to require treatment. Except for defects of refraction, these were referred to the family doctor who was informed that if specialist treatment was required, the School Medical Officer could make arrangements for this.

School children were sent to the following hospitals outside the county for advice and treatment by consultants during the year:

Cottage Hospital, Builth Wells,
County Hospital, Hereford,
General Hospital, Hereford,
Eye, Ear & Throat Hospital, Shrewsbury,
Robert Jones & Agnes Hunt Orthopaedic Hospital, Oswestry,
Victoria Eye Hospital, Hereford,
Plastic Surgery Centre, St. Lawrence Hospital, Chepstow

School children were treated as in-patients at the Llandrindod Wells Hospital during the year for the following conditions:

<u>Condition</u>	<u>No. Treated</u>
Infected Tonsils and Adenoids	5
Infected Tonsils	22
Infected Adenoids	1
Appendicitis	14
Abdominal Pain	4
Concussion	2
Chest Infection	2
E.N.T. Surgery	5
Lipoma of Back	1
For investigation	2
Cellulitis of right foot	1
Laceration of left ear	1
Fractures of both frontal regions	1

It will be seen that the majority of these children received operative treatment for Tonsils and Adenoids.

ORTHOPAEDIC TREATMENT

Orthopaedic Clinics are held at monthly intervals at County Hall by a Consultant and Registrar from the Oswestry Orthopaedic Hospital, and after-care is supervised by an Orthopaedic Sister who attends a clinic held twice monthly in the same building.

TREATMENT OF DEFECTIVE VISION AND SQUINT

One hundred and sixty-one children were examined by the Consultant Ophthalmic Surgeon, Mr. S. S. F. Munro; spectacles were prescribed for seventy-one children; in forty-four cases no change of spectacles previously prescribed was recommended and in forty-six cases no spectacles were prescribed.

DENTAL REPORT

Mr. Griffith, the School Dental Officer reports as follows:

"During the year 2,693 children were inspected and 2,238 required treatment.

This represents a considerable improvement on recent years, but nevertheless means that 83% of those inspected required treatment

The comparable figures for Wales as a whole are 69% and for England 57.9%

This high susceptibility to caries on which I commented in my initial report to the Education Committee in 1951, is a continuing feature of the dental scene. The original picture of massive decay, accompanied by considerable powers of recuperation and the formation of secondary dentine has been replaced by caries of rapid onset and little recuperative power, and is probably a reflection of the changed social conditions in rural areas.

The necessity for more frequent inspection and treatment is obvious, but the inducements to recruitment of manpower remain unchanged.

The dental condition of many new entrants is very good. This is not maintained in later years. It is unfortunate that an increased consumption of sweets seems to be an inevitable accompaniment to the start of school life and the ubiquitous "lolly" seems an obvious cause for the early appearance of decay in the anterior teeth of younger children.

There is a very considerable improvement in the standard of dental hygiene. It is unusual now to find children whose teeth show a complete neglect in cleaning. This leads to an increase in the conservation rate in deciduous teeth, but it does extend the necessary treatment time required for the younger age groups.

Despite the extensive caries found, it is pleasing to record that radical treatment tends to decrease. An interesting comparison with 1957 shows the change in the permanent extraction/filling ratio.

	<u>Extraction</u>		<u>Fillings</u>
1957	1	to	7.2
1966	1	to	17.6

This compares with an extraction/filling ratio for England and Wales as a whole of 1 to 5.49.

Orthodontics

An effort has been made to eliminate unco-operative patients. This has improved the final results, but does not reduce the number seeking this treatment.

Music

I have been using music in treatment sessions and have found it very helpful. It is unfortunate that radio reception in Radnorshire is poor and the only programme readily available is the "Light". This can be embarrassing if one forgets to switch off "Woman's Hour". Recorded music would be the obvious alternative.

In conjunction with music, I find that, whilst only using hypnosis for the very difficult cases, the techniques of relaxation and suggestion associated with this science, and a very considerable aid in the treatment of the nervous child.

In conclusion, I would like to express my appreciation to the Health Department, the teachers and in particular to my Surgery Assistant, Miss O. Mantle, for their help and co-operation.

INFECTIOUS AND CONTAGIOUS DISEASES

Certificates of exclusion from school were issued in respect of individual children suffering from infectious and contagious diseases as follows:

Infectious Diseases	Chicken Pox	57
	German Measles	75
	Measles	19
	Mumps	8
	Pneumonia	1
	Scarlet Fever	4
Contagious Diseases	Conjunctivitis	1
	Impetigo	1
	Ringworm	2

EXAMINATION OF TEACHERS & CANTEEN STAFF

The medical examination of intending teachers prior to their acceptance by training colleges or universities and of newly appointed teachers and canteen staff was continued during the year. One object is to ensure that no one is appointed to a post in close contact with children who is likely to be suffering from a communicable disease. An X-ray examination of the chest is made at the Llandrindod Wells Hospital as no Mass Radiography Unit is available. Twenty one intending teachers, 24 appointed teachers and 22 canteen staff were examined by me during the year. In addition, I examined 1 appointed teacher on behalf of other Authorities..

MILK IN SCHOOLS SCHEME

The percentage of children taking advantage of the milk-in-schools scheme is 77.57 as compared with 84.16 in 1965.

LLANDRINDOD WELLS RESIDENTIAL SCHOOL

In addition to their work in Radnorshire Schools, the Principal School Medical Officer and the Principal School Dental Officer and Dental Attendant, continue to undertake similar work at the Llandrindod Wells Residential School, which is administered by the Welsh Joint Education Committee and is a Residential Special School for Deaf and Partially Hearing Pupils serving Wales and Monmouthshire

A separate annual report is published on the work of the School Health Service in this school and this is appended

SCHOOL ATTENDANCES

At the end of the last quarter of 1966, there were 2,833 children attending Radnorshire Schools 1,646 children were on registers of the 34 primary schools and 1,187 children attended the six secondary schools

VISITS BY SCHOOL NURSES AND HEALTH VISITORS

The following visits have been made by the School Nurses and Health Visitors during the year 1966;

Pre Medical Inspection Visits	63
Medical Inspections	57
Follow up Medical Inspections	45
Hygiene Inspections	89
Hygiene Re-Inspections	17
Follow up Hygiene Inspections	48

Table A - Periodic Medical Inspections

Age Groups Inspected (by year of birth)	No. of Pupils Inspected	Physical Condition of Pupils Inspected			Pupils found to require treatment (excluding dental diseases and infestation with vermin)			
		Satisfactory	Unsatisfactory	No.	% of Col. 2	For Defective Vision (Excluding squint)	For any of the other conditions recorded in Part II	Total Individual Pupils
		No.	% of Col. 2					
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)
1962 and later	13	13	100%	-	-	1	2	2
1961	185	185	100%	-	-	2	7	5
1960	105	104	99%	1	1%	-	9	8
1959	8	8	100%	-	-	-	4	2
1958	3	2	66.6%	1	33.4%	-	2	2
1957	3	3	100%	-	-	-	2	2
1956	76	75	98.7%	1	1.3%	-	3	2
1955	106	105	99.1%	1	9%	4	10	10
1954	39	39	100%	-	-	-	3	3
1953	1	1	100%	-	-	-	-	-
1952	92	90	97.8%	2	1.2%	6	3	9
1951 and earlier	125	124	99.2%	1	.8%	9	10	18
Total	756	749	99.1%	7	.9%	22	55	64

DEFECTS FOUND BY MEDICAL INSPECTION DURING THE YEAR

Table A - Periodic Inspections

1	Defect or Disease (2)	Periodic Inspections							
		Entrants		Leavers		Others		Total	
		T (3)	O (4)	T (5)	O (6)	T (7)	O (8)	T (9)	O (10)
4	Skin	-	11	2	5	1	7	3	23
5	Eyes (a) Vision	1	34	14	20	3	19	18	73
	(b) Squint	2	6	-	3	1	1	3	10
	(c) Other	-	2	1	3	-	6	1	11
6	Ears (a) Hearing	2	2	-	3	3	3	5	8
	(b) Otitis Media	-	7	-	3	1	1	1	11
	(c) Other	-	1	1	-	-	-	1	1
7	Nose and Throat	-	32	1	8	1	8	2	48
8	Speech	2	19	-	2	-	3	2	24
9	Lymphatic Glands	1	8	-	1	-	-	1	9
10	Heart	1	11	-	8	2	3	3	22
11	Lungs	1	10	2	3	2	1	5	14
12	Development (a) Hernia	-	1	-	-	-	-	-	1
	(b) Other	-	18	2	3	4	4	6	25
13	Orthopaedic (a) Posture	-	5	-	4	-	2	-	11
	(b) Feet	3	27	-	9	1	14	4	50
	(c) Other	2	17	-	15	1	10	3	42
14	Nervous System (a) Epilepsy	-	3	-	-	-	1	-	4
	(b) Other	-	3	-	1	-	2	-	6
15	Psychological (a) Development	-	6	-	-	1	3	1	9
	(b) Stability	-	4	-	-	-	4	-	8
16	Abdomen	-	1	-	-	-	1	-	2
17	Other	-	-	-	-	-	-	-	-

SPECIAL INSPECTIONS

Defect Code No.	Defect or Disease	Special Inspections	
		Pupils Requiring Treatment	Pupils Requiring Observation
(1)	(2)	(3)	(4)
4.	Skin	-	1
5	Eyes (a) Vision (b) Squint (c) Other	1 - -	2 1 -
6	Ears (a) Hearing (b) Otitis Media (c) Other	1 - -	2 - -
7	Nose and Throat	-	1
8	Speech	-	1
9	Lymphatic Glands	-	-
10	Heart	-	2
11	Lungs	1	2
12	Development (a) Hernia (b) Other	- -	- 1
13	Orthopaedic (a) Posture (b) Feet (c) Other	- - -	1 - 1
14	Nervous System (a) Epilepsy (b) Other	- -	- -
15	Psychological (a) Development (b) Stability	- -	2 1
16	Abdomen	-	-
17	Other	-	-

Table B - Other Inspections

No. of Special Inspections	19
No. of Re-inspections	74
	<hr/>
Total	93

Table C - Infestation with Vermin

- (a) Total number of individual examinations of pupils in schools by school nurses or other authorised person 5061
- (b) Total number of individual pupils found to be infested 6
- (c) Number of individual pupils in respect of whom cleansing notices were issued (Section 54(2), Education Act, 1944)
- (d) Number of individual pupils in respect of whom cleansing orders were issued (Section 54 (3), Education Act, 1944)

PART III - TREATMENT OF PUPILS

Table A - Eye Diseases, Defective Vision and Squint

	<u>No. of cases known to have been dealt with</u>
External and other, excluding errors of refraction and squint	nil
Errors of refraction (including squint)	<u>161</u>
Total	161
No. of pupils for whom spectacles were prescribed	71

Table B - Diseases and Defects of Ear, Nose and Throat

Received operative treatment	
(a) for diseases of the ear	nil
(b) for adenoids and chronic tonsillitis	23
(c) for other nose and throat conditions	6
Received other forms of treatment	<u>7</u>
Total	36
Total number of pupils in schools who are known to have been provided with hearing aids	
(a) in 1966	nil
(b) in previous years	2

Table C - Orthopaedic and Postural Defects

(a) Pupils treated at clinics or out- patients departments	figures not available
(b) Pupils treated at school for postural defects	<u>nil</u>
Total	

Table D - Diseases of the Skin (excluding uncleanliness)

	<u>No. of cases known to have been treated</u>
Ringworm (scalp)	-
(body)	2
Scabies	-
Impetigo	1
Other skin diseases	-
	<hr/>
Total	3

Table E - Child Guidance

Pupils treated at Child Guidance Clinics	Nil
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Table F - Speech Therapist

Pupils treated by Speech Therapist	16
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Table G - Other Treatment given

(a) Pupils with minor ailments	nil
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(b) Pupils who received convalescent treatment under School Health Service arrangements	nil
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(c) Pupils who received B.C.G. vaccination	210
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Total	<hr/> 210
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TABLE IV - DENTAL INSPECTION AND TREATMENT
(carried out by the Authority)

(a) Attendances and Treatment

	<u>Ages</u> <u>5-9</u>	<u>Ages</u> <u>10-14</u>	<u>Ages</u> <u>15 & over</u>	<u>Total</u>
First visit	556	537	166	1259
Subsequent visits	81	265	118	464
Total visits	637	802	284	1723
Additional courses of treatment commenced	22	31	28	81
Fillings in permanent teeth	496	939	342	1777
Fillings in deciduous teeth	516	40	-	556
Permanent teeth filled	466	907	336	1709
Deciduous teeth filled	516	40	-	556
Permanent teeth extracted	-	67	30	97
Deciduous teeth extracted	324	163	-	487
General anaesthetics	-	1	-	1
Emergencies	31	35	41	107

Number of pupils X-rayed..... 21
 Prophylaxis.....1063
 Teeth otherwise conserved.....1897
 Number of teeth root filled..... 1
 Inlays..... -
 Crowns..... -
 Courses of treatment completed.....1339

(b) Prosthetics

	<u>Ages</u> <u>5-9</u>	<u>Ages</u> <u>10-14</u>	<u>Ages</u> <u>15 & over</u>	<u>Total</u>
Pupils supplied with F.U. or F.L. (first time)	-	-	-	-
Pupils supplied with other dentures (first time)	-	2	-	2
Number of dentures supplied	-	2	-	2

(c) Anesthetics

General anaesthetics administered by Dental Officer Nil

(d) Inspections

a. First Inspection at school. Number of Pupils.....2604
 b. First Inspection at Clinic. Number of Pupils..... 89
 Number of a. and b. found to require treatment.....2238
 Number of a. and b. offered treatment.....1938
 c. Pupils re-inspected at school clinic..... 62
 Number of c. found to require treatment..... 62

(e) Sessions

Sessions devoted to treatment.....	370
Sessions devoted to inspection.....	45½
Sessions devoted to Dental Health Education.....	5½

(f) Orthodontics

Cases remaining from previous year.....	55
New cases commenced during year.....	27
Cases completed during year.....	44
Cases discontinued during year.....	3
No. of removable appliances fitted.....	25
No. of fixed appliances fitted.....	3
Pupils referred to Hospital Consultant.....	1

HANDICAPPED PUPILS IN RADNORSHIRE

1. Blind
2. Partially sighted
3. Deaf
4. Partially hearing
5. Physically Handicapped
6. Delicate
7. Maladjusted
8. Educationally Subnormal
9. Epileptic
10. Speech Defects

Total
1-10

	1	2	3	4	5	6	7	8	9	10	
Number of Handicapped Pupils from the area attending Special School as Day Pupils:	-	-	-	1	-	-	-	-	-	-	1
Boarding Pupils:	-	1	-	-	2	1	1	5	-	-	10
Number of Handicapped Pupils from the area req: places in special schools or Homes, but remaining unplaced:	-	-	-	-	-	1	-	6	-	-	7
Totals	-	1	-	1	2	2	1	11	-	-	18

WELSH JOINT EDUCATION COMMITTEE

Y CYD-BWLLGOR ADDYSG CYMREIG

LLANDRINDOD WELLS RESIDENTIAL SCHOOL

A N N U A L R E P O R T

of the

SCHOOL MEDICAL OFFICER

for

1966

F. J. H. CRAWFORD, M.D., B.Sc., D.P.H.
Barrister-at-Law

TO THE CHAIRMAN AND MEMBERS OF THE GOVERNING BODY
OF THE LLANDRINDOD WELLS RESIDENTIAL SCHOOL

Mr. Chairman, Ladies and Gentlemen,

I have the honour to present to you my Annual Report as School Medical Officer of the Llandrindod Wells Residential School for the year 1966.

As usual, I carried out routine medical inspection of every child during the year, and as usual enjoyed each such visit. The courage and cheerfulness of these children, even the most handicapped, is inspiring and must surely be an example to all of us.

Routine medical inspection showed that, apart from those pupils with special defects, the general health of the children during 1966, was on the whole, quite satisfactory.

During the year, there were 96 admissions to the sick bay and these included 2 cases of Rubella; seven children developed Tonsillitis and one, a mild form of Rheumatic Fever.

Four children were admitted to Llandrindod Wells Hospital, two for Appendicectomy, one with Bronchial Pneumonia and another for observation for abdominal pain. This last child was found to have nothing abnormal and was discharged from hospital the following day.

One child attended the out-patient department at the Llandrindod Wells Hospital to enable a catheter specimen of urine to be examined for suspected Pyelitis, but nothing abnormal was found.

Accidents during the year were mainly confined to bruises, grazes and cuts, five of which required suturing.

Three children attended the out-patient department of the Llandrindod Wells Hospital X-ray of limbs following injury. One of these children was found to have a greenstick fracture of the clavicle, and the other two severe sprains.

Routine chest X-ray was carried out on one boy with satisfactory results. One other X-ray was carried out on a child with Hiatus Hernia.

Two children were seen by Dr. Hugh Fisher, Consultant Paediatrician at Llandrindod Wells Hospital. One, a diabetic, is under regular supervision by Dr. Fisher. Close attention is paid to his diet and treatment at the school.

Several children were seen by Mr. Munro, Consultant Ophthalmic Surgeon, at the School Eye Clinic.

Two children were examined by Mr. Brian Thomas at the Orthopaedic Clinic. One of these children regularly requires specially-made boots.

One boy was examined by Dr. Michael Craft, Consultant Psychiatrist at Brynhyfryd Hospital.

Cleanliness of heads over the year has, apart from two new pupils, been most satisfactory.

As a result of his illness, the association of Mr. Crowther of Swansea, the Ear, Nose and Throat Surgeon to the School, appears to have ended. We extend our best wishes to him.

It is a pleasure to acknowledge the support and encouragement which I have received in my work of the school, from you, Mr. Chairman, and members of the Governing Body.

I should also like to thank the headmaster, Matron and staff of the school for their co-operation, and particularly the School Nurse, Mrs. Day.

I am,

Your obedient servant,

FRANK J. H. CRAWFORD.

ANNUAL REPORT OF THE SCHOOL MEDICAL OFFICER FOR
1966

CLASSIFICATION OF CHILDREN AND CAUSES OF DEAFNESS

Of the children in the school at the end of the Summer Term, 8 were partially hearing. Two of these children are also additionally handicapped although they are not educationally so regarded and are taught as partially deaf children.

The causes of deafness of those children who are not congenitally deaf, but became deaf as a result of deafness is as follows:

(The causes have been given as accurately as it has been possible to ascertain them.)

"Meningitis"	15
Pneumococcal meningitis.....	2
Tuberculous meningitis (streptomycin therapy).....	8
Chicken pox and meningitis.....	1
Pneumonia and whooping cough.....	1
Maternal rubella.....	4
Deafness, perceptive, familial.....	1
Rhesus incompatibility.....	1
Pink disease.....	1

CHILDREN WITH MULTIPLE DEFECTS

Thirteen (13) of the children in the school had other gross defects in addition to deafness. Details of these children are as follows:

E. A.	Cleido cranial dysostosis
J. C.	Mentally subnormal
R. C.	Mentally subnormal
A. D.	Partially-sighted
L. E. T.	Partially-sighted
W. G.	Educationally subnormal
H. J.	"Ineducable"
R. K.	Psychotic
G. L.	Cerebral Palsy
A. M.	Maladjusted
G. R.	Mongol
C. L. S.	Spastic
M. O.	Diabetic

I must reiterate that, unlike nearly all other schools for the deaf, the Llandrindod Wells Residential School has a number of pupils with multiple defects, and these include some children who are "borderline" cases for education in any school, and who, if excluded, might be relegated to home care or attendance at a Junior Training Centre. Such children, as might be expected, occupy a disproportionate amount of time of the staff, but it has never been suggested that they should be excluded from the school.

AUDIOMETRY

Hearing tests continue to be made of all entrants to the school with the Peter's Tone Audiometer as soon as possible after their admission, and an audiometric test is made of every child in the school at least once a year. The Audiometer has been placed on the Royal National Institute for the Deaf list for biennial servicing and recalibrating.

GROUP HEARING AIDS

Some speech audiometry is done by using Speech Training Hearing Aids, and the use of standardised loops.

INDIVIDUAL HEARING AIDS

Every child is given a hearing aid so that the stimulus to mental development which even a small residue of hearing can give, is made use of. In 14 cases, commercial hearing aids, giving greater amplification than Medresco Aids, were recommended by Mr. Crowther, Consultant Ear, Nose and Throat Surgeon to the School, and in each case the sending authority has supplied the aid recommended. The news that a new Medresco aid giving higher amplification is being developed, is welcome, although it will be another three years before it is available.

MEDICAL INSPECTIONS

As in former years, every child is inspected by the School Medical Officer as soon as possible after admission to the school and each year thereafter. The School Nurse is present at each inspection. Statistics of the findings at such inspections are appended as usual.

B.C.G. VACCINATION SCHEME

The scheme for B.C.G. vaccination against tuberculosis of school children in their fourteenth year, includes those children approaching 13 years of age, and those of 14 years or older who had not previously been protected. Of the 7 children in the eligible age groups, the parents of 6 consented to tuberculin testing and vaccination where necessary. Of those tuberculin tested, 5 were found to be tuberculin negative, and were vaccinated with B.C.G. The figures are too small to be statistically significant.

MEDICAL CARE UNDER PART IV OF THE NATIONAL HEALTH SERVICE ACT, 1946

All boys at the school are on the list of Dr. H.J. Houghton and the girls on the list of Dr. M. Dilys Owen, two General Practitioners who both reside within easy reach of the school and attend the children when ill. Prompt attention is in fact given by these doctors to any child who needs medical advice and treatment.

VISITS OF CONSULTANT AURIST

Mr. J. Crowther, the Consultant Ear, Nose and Throat Surgeon, visited the school on one occasion, in June, and examined 13 children.

Unfortunately, Mr. Crowther was taken ill soon after this visit and was not able to attend the school again during the year. Representation has been made to the Welsh Hospital Board of the need for an E.N.T. Surgeon to visit this area and see children at this school regularly.

TREATMENT OF DEFECTIVE VISION AND SQUINT

Eleven (11) children were found at Medical Inspection to require treatment for defective vision and three of these needed treatment for squint. Twenty (20) children who needed treatment for refraction errors were seen by the Consultant Ophthalmic Surgeon at the Llandrindod Wells Eye Clinic.

REPORT OF THE SCHOOL DENTAL OFFICER

Mr. P. G. H. Griffith, L.D.S., submits the following report:

"The treatment figures show that the dental condition of the children is reasonably satisfactory. The filling-extraction ratio is approximately 20:1, a much better figure than shown by the school dental services generally.

The standard of dental hygiene is high and the co-operation of the staff is a great help in ensuring the smooth completion of treatment."

STATISTICS FOR THE PUPILS ATTENDING THE RESIDENTIAL
SCHOOL FOR THE DEAF, LLANDRINDOD WELLS

TABLE I

A. PERIODIC MEDICAL INSPECTIONS

Number of Routine Inspections:

Entrants.....	12
Annuals.....	54
Leavers.....	14
	<hr/>
	80
	<hr/>

PUPILS FOUND TO REQUIRE TREATMENT

Number of individual pupils found at Periodic Inspection to require treatment (excluding deafness, speech defects, dental disease and infestation with vermin)

<u>Group</u>	<u>For Defective Vision (ex- cluding squint</u>	<u>For any of the other conditions recorded in Table II</u>	<u>Total individual pupils</u>
Entrants.....	2	-	2
Annuals.....	7	26	21
Leavers.....	2	5	6
Total (Prescribed groups).....	11	31	29
Other periodic inspections..	-	-	-
Grand Total	11	31	29

RETURN OF DEFECTS FOUND BY MEDICAL INSPECTION DURING THE
YEAR ENDED DECEMBER, 1966

<u>Defect</u> <u>Code No.</u>	<u>Defect or Disease</u>	<u>Requiring</u> <u>Treatment</u>	<u>No. of Defects</u> <u>required to be</u> <u>kept under</u> <u>observation, but</u> <u>not requiring</u> <u>Treatment</u>
4	Skin.....	3	
5	Eyes (a) vision.....	11	5
	(b) squint.....	3	1
	(c) others.....	1	-
6	Ears (b) Otitis Media.	1	-
	(c) other.....	-	-
7	Nose and Throat.....	4	5
9	Lymphatic Glands.....	-	-
10	Heart and Circulation.	1	2
11	Lungs.....	1	3
12	Development		
	(a) Hernia.....	-	-
	(b) other.....	2	5
13	Orthopaedic		
	(a) Posture.....	1	6
	(b) Flat Foot....	5	4
	(c) other.....	6	5
14	Nervous System		
	(a) Epilepsy.....	1	-
	(b) other.....	1	2
15	Psychological		
	(a) Development..	1	5
	(b) Stability....	-	3
16	Abdomen.....	-	-
17	Other.....	-	-

TABLE III

DENTAL TREATMENT

No. of children actually treated.....	71
Attendances made by pupils for treatment.....	77
Fillings.....	109
Extractions.....	16
Administration of general anaesthetics.	Nil
Other operations.....	92

Orthodontics

Apparatus fitted.....Nil

